

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore(GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	04/09/2016 00:13
Date Of Accident	01/09/2016 21:15
Exact Location Of Accident	Jet Aviation 1075 West Camp Road 797800
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG4544D
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Insured/Policyholder

Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD.
Co Reg No	199803778Z
Email Address	rahimin.zakaria@jetaviation.com.sg
Mobile Phone No	(LOCAL) +65-97261265
Alternative Phone No	Office-97261265

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD CV
Exact Purpose for which vehicle was being used at time of accident	COMMERICAL
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Commercial Vehicle

Insurance Company

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type Of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	

Driver

Name of Driver	RAHIMIN BIN ZAKARIA
NRIC No	S7936972A
Date Of Birth	08/12/1973
Occupation	Indoor
Date Of Driving Pass	09/11/2015
Driving Experience	0 Year And 9 Month
Gender	Male
Mobile Number	(Local) +65-97261265
Fax Number	
Contact Number	
EMail Address	rahimin.zakaria@jetaviation.com.sg

Address

Postcode

Was driver an employee of the Insured's Company No

If No, Relationship of the Driver with the Insured Other - HIRER

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident Side Swipe- Same Direction

Weather Conditions Clear

Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No

Was any body injured in the Accident? No

Was any other material or property damaged? Yes

Was there any video captured by Car Camera? No

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? No

If Yes, Please state which Police Station

Was notice of intended Prosecution given? No

If Yes, against whom?

Circumstances of Accident

At 2116LT as I was travelling straight on the left lane with speed 25km/hour along Tanglin Halt Road, the right side mirror was hit by lorry YL4190Z from the right lane resulting in broken side mirror/panel, dented door and scratches, and right side small mirror cracked per attached photos. The lorry was intending to turn right to carpark but made a wide turn resulting in hitting SKG4544D. No injury involving both party.

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YL4190Z

Vehicle Make/Model/Colour MITSUBISHI / FE639C6SRDEA

Details Of Properties NA

Name of Driver SONG HENG

NRIC/Passport Number G2168445M

Contact Number NA

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Sketch Plan

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that:
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
(ii) investigating the accident and/or my claims;
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
(collectively the "Purposes")
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

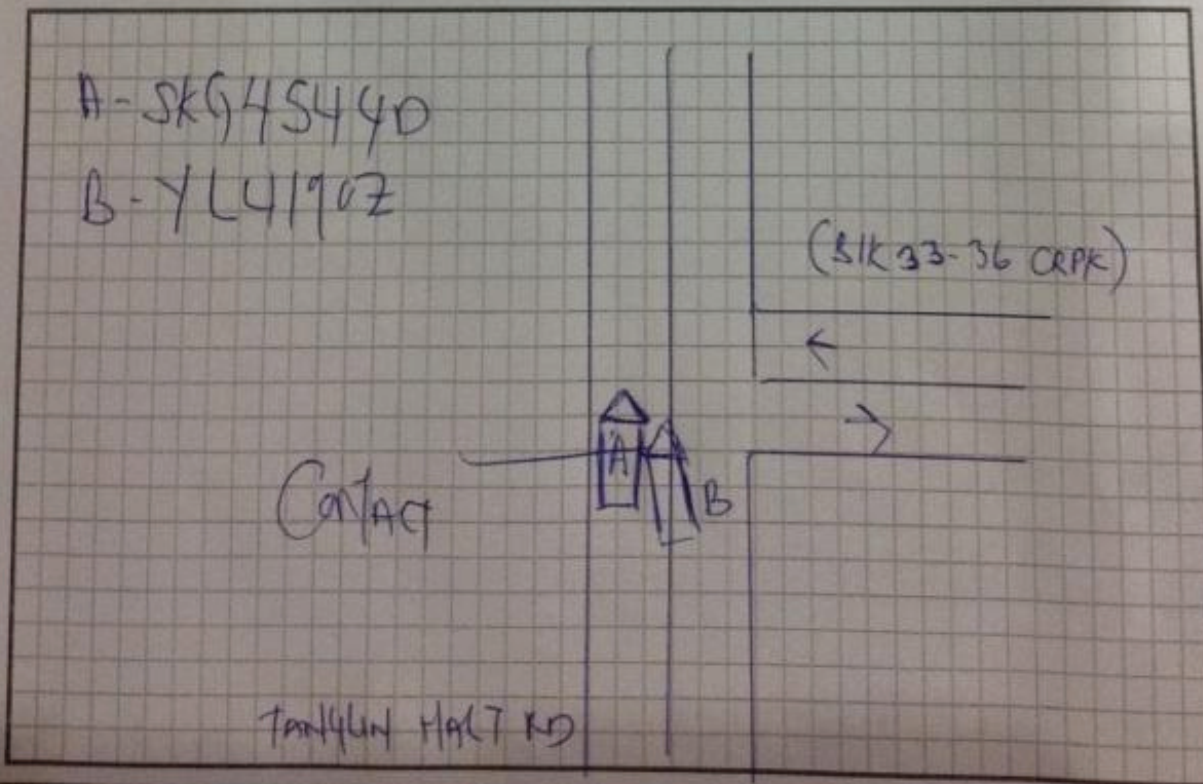
MARS OFFICER
MD SHARIL
S8522671A

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre
Personnel

Sketch Plan



Sketch Plan #2

ACCIDENT STATEMENT (2000 characters)

@ 2116LT as I was travelling straight on the left lane with speed 25km/hour along Tanglin Halt Road, the right side mirror was hit by lorry YL 4190 Z from the right lane resulting in broken side mirror/panel, dented door and scratches, and right side small mirror cracked per attached photos. The lorry was intending to turn right to carpark but made a wide turn resulting in hitting SKG 4544 D. No injury involving both party.

Taxi Voucher No.:

Are you claiming your own insurance policy for the repair of your vehicle?

No, Reporting only

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY MARS OFFICER - SHARIL, S8522671A

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

3 September, 2016 10:10 pm

Date/Time:

3 September, 2016 10:10 pm

Accident Photo



Accident Photo



Accident Photo



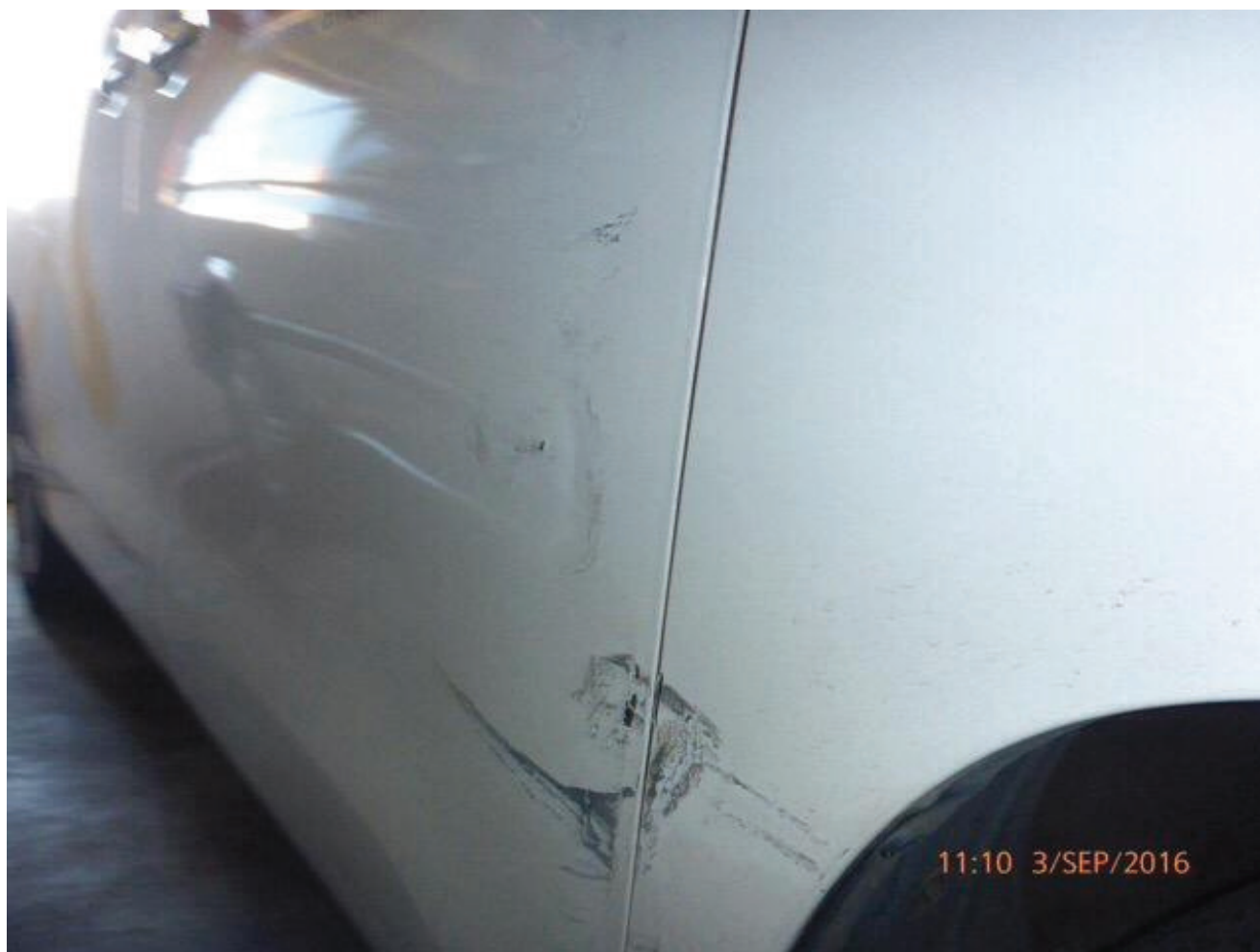
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Accident Photo

